

Exhibit 23

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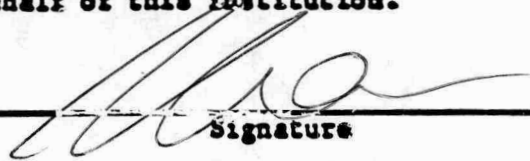
RETURN TO:

ECFMG
3624 Market Street
Philadelphia, PA 19104-2685
U.S.A.

Re: 482-700-2

Dr. Oluwafemi
Charles Igberase

I hereby certify that the attached diploma or other credential for the individual noted above is authentic and correct and that I am authorized to certify this on behalf of this institution.


Signature

3rd June, 1992

Date

JUDE UZOMA OHAERI

Name (Please Print or Type)

SUB-DEAN (UNDERGRADUATE) ✓

Title

COLL OF MED, UNIVERSITY OF IBADAN, NIGERIA.

Name of Medical School

WILLIAM DEAN UNDERGRADUATE
FACULTY OF DENTISTRY
& DENTISTRY
COLLEGE OF MEDICINE
UNIVERSITY OF IBADAN
IBADAN NIGERIA

I cannot certify that the diploma or other credential for the individual noted above is authentic and correct because _____

Signature

Date

Name (Please Print or Type)

Title

Name of Medical School

Seal

Form 399A
March 1987

Charles Olufermi Igberaese

having fulfilled all the requirements of the University
and passed the prescribed examinations has this day
been admitted to the degree of

Bachelor of Medicine
and
Bachelor of Surgery

[Signature]

[Signature]
VICE-CHANCELLOR

DATE *June 19, 1987*

[Signature]
REGISTRAR

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DEPARTMENT OF HEALTH
& HUMAN SERVICES
BUREAU OF MEDICAL SERVICES
OFFICE OF INTERNATIONAL
AFFAIRS
WASHINGTON, D.C. 20545

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JUL 13 1992

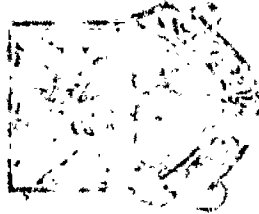
Principal of Embassy

Minister of Medicine

been admitted to the practice of

and based on prescribed regulations per the law
having fulfilled all the requirements of the University

of Medical Sciences



Ministry of Health

University of Ibadan



Charles Olufermi Igberaese

having fulfilled all the requirements of the University
and passed the prescribed examinations has this day
been admitted to the degree of

Bachelor of Medicine

and

Bachelor of Surgery

[Signature]
VICE-CHANCELLOR

DATE

June 19, 1987

[Signature]
REGISTRAR

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